



WISCONSIN REGULATORY DIGEST

Volume 12, No. 1 **A Publication of the**
DENTISTRY EXAMINING BOARD **MARCH, 2000**

Application Process for Dental Hygiene Certificate to Administer Local Anesthesia

November's regulatory digest contained the educational requirements for the local anesthesia portion Chapter DE 7, effective November 1, 1999.

The Department of Regulation and board members have received numerous phone calls with questions regarding certification requirements and its process. We advise the following:

Write or email to obtain a copy of DE 7 and the application packet for the Dental Hygiene Certificate to Administer Local Anesthesia:

THE WISCONSIN DENTISTRY EXAMINING BOARD

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The application was revised at the January Board Meeting and contains the affidavit of information needed for proper processing. Documents requested with the application include: 1. A copy of current CPR Certification, 2. Course title and date certificate of completion completed by the dental or dental hygiene school 3. Certificate of inferior alveolar injection to be completed by supervising dentist only if injection is completed outside of coursework (this certificate is not needed if provided within the educational coursework).

All education must be provided by an accredited dental or dental hygiene school.

Chapter DE 3.04 Oral Systemic Premedications and Subgingival Sustained Release Chemotherapeutic Agents

On September 1, 1999, the Dentistry Examining Board held a public hearing for consideration of Chapter DE 3.04 Oral Systemic Premedications and Subgingival Sustained Release Chemo-

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therapeutic Agents that may be administered
by a licensed dental hygienist through

delegation by a licensed dentist. The rule was approved as written and submitted to legislative committees for review following this public hearing.

An effective date has not been determined yet as it has not been returned from the legislature. The time element needed for this process is simply a normal part of any rule/law-making process.

Stay tuned to your Digest for information on its progress!

Wisconsin Statutes and Administrative Code Relating to the Practice of Dentistry and Dental Hygiene

With some additions to the Wisconsin Statutes and Administrative Code in 1999 and 2000 it is prudent to maintain a current copy for reference and resource. These are available. To purchase from the department, please make a check payable for \$5.28 and request a dental code book.

Collaborative Efforts of Regional Testing Agencies

Regional dental testing agencies such as the Central Regional Dental Testing Service, Inc. (CRDTS) are frequently chastised because they are perceived as an obstacle to freedom of movement of licensed dental professionals. Most states that are affiliated with a region accept only the passing test scores of that regional exam in the licensing process. Though many states will grant a “license by credential”, it is not uncommon for a dentist or hygienist seeking a license in another state to find that they are lacking in one or more of the credentials required by that state. These individuals would then be required to take the regional clinical exam accepted by that state.

There are important facts about regional testing agencies that we should be aware of.

One is that regional testing agencies exist only because the states require they exist. If the eleven states in CRDTS decided tomorrow to administer their own clinical exam, or to do away with that licensure requirement all together, CRDTS would cease to exist. The requirements for licensure are determined ultimately by the state legislature. If you have the desire to eliminate clinical licensure exams, you should lobby your legislator, (not the President of CRDTS). At this time, there is an absolute necessity for an entry level clinical licensure exam, but that is a topic to be addressed at another time.

Many may be unaware of the recent extensive collaboration between the Western Regional Examining Board (WREB) and CRDTS. The effort to reach an agreement on common exam content and scoring systems began in 1997. There have been several meetings of the leadership in both organizations, and an exchange of committee members. The 2000 exam season will be the third year that both organizations have participated in an examiner exchange. A WREB examiner participates fully at several CRDTS exams, meaning he or she completes the standardization and calibration exercises, examines the candidates, and is subjected to examiner critiques and profiles. CRDTS examiners participate at WREB exams in the same way. The goal of these meetings and exchanges is to develop our exams in such a way that content and scoring will be similar enough that states in each of the two regions would accept the test results of the other region. This goal has been nearly attained, and in the next two to three years many state boards will be accepting both CRDTS and WREB test results. Hopefully similar collaboration can occur with Southeast Regional Testing Agency (SRTA) and Northeast Regional Board (NERB). Will there ever be one National Clinical Licensure Examination? Probably, but it will take time

and some broad paradigm shifts before the dental profession witnesses such a change. The successful collaboration between CRDTS and WREB is a giant step in the right direction.

The American Association of Dental Examiners (AADE) provides a national forum for state boards, regional testing agencies, and educators to discuss and debate topics relevant to dental education and licensure. This organization meets twice per year, and its programs have been addressing the issue of freedom of movement. The role of the AADE in strengthening the relationships between the various licensing and testing organizations has been very significant, and it will only continue to grow in importance.

It is very easy to be critical of the clinical examination process for dental and dental hygiene licensure if one is not aware of the tremendous effort made by the testing agencies to make the exams fair, valid, and reliable. Also, the testing agencies have expended considerable resources on collaborative efforts to structure their exams more similarly. It is important for the dental profession to realize this is not an us versus them. We all have a serious commitment to and profound respect for our profession, and want it to remain the superb profession that it always has been.

During 1998 received shipments of controlled substances (hydrocodone and diazepam) at his residence address. Did not maintain controlled substance records. Dispensed hydrocodone to an aunt, a sister, his mother, his wife and himself. Dispensed diazepam to his father. Also ordered controlled substances from a distributor using the DEA registration number of another dental practitioner. Following a DEA inquiry he surrendered his controlled substance prescribing privileges. Effective 11/3/99. Sec. 447.07(3)(a),(f),(L), Stats. DE 5.02(6),(16),(20) Case #LS9911031DEN

2000 Meeting Dates

January 5, 2000	Room 179A
March 1, 2000	Room 179A
May 3, 2000	Room 179A
July 12, 2000	Room 179A
September 6, 2000	Room 179A
November 1, 2000	Room 179A

“I’ve learned that if you smile at people, they will almost always smile back.”

Discipline

VALI KIAIE, DDS

FOX POINT WI

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Verifications:

All requests for verification of license status must be in writing. There is no charge for this service.

Endorsements:

Requests for endorsements to other states must be in writing. The cost is \$10. Please make check or money order payable to the Department of Regulation and Licensing.

Visit the Department's Web Site:

<http://badger.state.wi.us/agencies/drl/>
Send comments to dorl@drl.state.wi.us

Digest on Web Site:

The November, 1997, September, 1998, April, 1999, November, 1999 are on the Web.

Wisconsin Statutes and Code:

Copies of the Dentistry Examining Board Statutes and Administrative Code can be ordered from the Department. Include your name, address, county and a check payable to

the Department of Regulation and Licensing in the amount of \$5.28. The latest Edition is dated May, 1999.

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